FOR US POSTAL SERVICE DELIVERY:
Office of Laboratory Animal Welfare
Division of Assurances
6705 Rockledge Drive
RKL 1, Suite 360, MSC 7982
Bethesda, Maryland 20892-7982
Home Page: http://grants.nih.gov/grants/olaw/olaw.htm

FOR EXPRESS MAIL:
Office of Laboratory Animal Welfare
Division of Assurances
6705 Rockledge Drive, Suite 360
Bethesda, Maryland 20817
Telephone: (301) 496-7163
Facstimile: (301) 402-7065

Date: February 25, 2016

Reference: Animal Welfare Assurance Approval Letter for #A4172-01

Dr. Loretta A. Moore Vice President, Division of Research and Federal Relations Institutional Official Jackson State University P.O. Box 17057 Jackson, MS 39217

Dear Dr. Moore:

I am pleased to inform you that The Office of Laboratory Animal Welfare (OLAW) reviewed and approved the renewal of your institution's Animal Welfare Assurance (Assurance) that was submitted in compliance with the Public Health Service (PHS) Policy on Humane Care and Use of Laboratory Animals (Policy), as revised August 2002.

Your Assurance renewal, number A4172-01, became effective on February 25, 2016 and expires on January 31, 2020. This Assurance supersedes all previously issued Assurances. *Please include the Assurance number in all correspondence to OLAW*. A copy of the Assurance signature page is enclosed.

The Assurance is a key document in defining the relationship of your Institution to the PHS. It sets forth the responsibilities and procedures of your Institution regarding the care and use of laboratory animals. Among the important elements of the Assurance, I would especially call your attention to the reporting requirements that are essential for continued compliance with the PHS Policy. Please note that a Report to OLAW is required at least once every 12 months. The reporting period is the calendar year. Reports, for the previous calendar year, are due January 31.

Sincerely,

Venita B. Thornton, DVM, MPH

Senior Assurance Officer

Office of Laboratory Animal Welfare

CC:

IACUC Chairperson
Regulatory Compliance Officer / Administrator

VII. Institutional Endorsement and PHS Approval

A. Authorized Institutional Official

Name: Dr Loretta A. Moore

Title: Vice President, Division of Research and Federal Relations

Name of Institution: Jackson State University Address: (street, city, state, country, postal code)

1400 J.R> Lynch P. O. Box 17057 Jackson, MS 39217

Phone:

(601) 979-2931

Fax:

(601) 979-3664

E-mail:

Loretta.a.moore@jsums.edu

Acting officially in an authorized capacity on behalf of this Institution and with an understanding of the Institution's responsibilities under this Assurance, I assure the humane care and use of animals as specified above.

B. PHS Approving Official (to be completed by OLAW)

Venita B. Thornton, D.V.M., M.P.H. Senior Assurance Officer, Division of Assurances Office of Laboratory Animal Welfare (OLAW) NIH/OD/OER 6705 Rockledge Drive RKL 1, Suite 360-MSC 7982 Bethesda, Maryland 20892-7982 thorntov@od.nih.gov

Signature:

Assurance Number: A4172-01

Expiration Date: